

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/085472 Confirmation No.: 4874
Applicant : Christer O. Andreasson
Filing Date : 02/26/2002
Title : SYSTEMS AND METHODS FOR TRACKING
PHARMACEUTICALS WITHIN A FACILITY
Group Art Unit : 2876
Examiner : Jared Fureman
Docket No. : 706737.35 (formerly 263/291)
Customer No. : 34313

Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

RESPONSE/AMENDMENT TRANSMITTAL

Transmitted herewith is a response/amendment in the above-identified application in connection with the Office Action dated October 9, 2003.

Applicant hereby petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$55.00	\$110.00
<input type="checkbox"/> two months	\$210.00	\$420.00
<input type="checkbox"/> three months	\$475.00	\$950.00
<input type="checkbox"/> four months	\$740.00	\$1,480.00
<input type="checkbox"/> five months	\$1,005.00	\$2,010.00
Fee		\$0.00

CERTIFICATE OF MAILING
37 CFR §1.8

I hereby certify, pursuant to 37 CFR §1.8, that I have reasonable basis to expect that that this paper or fee (along with any referred to as being attached or enclosed) would be mailed or transmitted on or before the date indicated with the United States Postal Service with sufficient postage as first class mail on the date shown below in an envelope addressed to the Mail Stop Fee-Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: January 8, 2004


Signature of Person Mailing Document

Applicant :
Appl. No. :
Examiner :
Docket No. :

Applicant hereby submits notice that additional claims are filed with amendment.

Fee Calculation: TOTAL AMOUNT OF PAYMENT: \$219.00

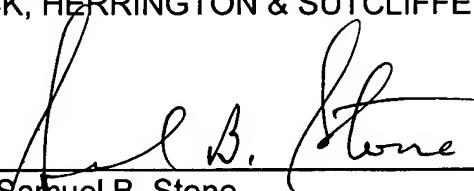
- A. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 15-0665.
☒ Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 15-0665.
B. ☐ Payment Enclosed
☐ Check ☐ Credit Card ☐ Money Order ☐ Other

Total Claims	37	-	27	=	10	x	\$18.00	\$180.00
Independent Claims	6	-	3	=	3	x	\$86.00	\$258.00
Multiple Dependent Claims	\$290	(if applicable)	<input type="checkbox"/>					\$0.00
TOTAL OF ABOVE CALCULATIONS								\$438.00
Reduction by 1/2 for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28. <input checked="" type="checkbox"/>								\$219.00
Extension of Time (from above)								\$0.00
Assignment -- \$40 (if applicable) <input type="checkbox"/>								\$0.00
TOTAL FEES SUBMITTED HERewith								\$219.00

Respectfully submitted,

ORRICK, HERRINGTON & SUTCLIFFE LLP

Dated: January 8, 2004

By: 
Samuel B. Stone
Reg. No. 19,297

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AMENDMENT

Sir:

In response of the Office Action dated October 9, 2003, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper

Amendments to the Claims are reflected in the listing of claims, which begins on page 3 of this paper.

Remarks/Arguments begin on page 14 of this paper.

01/14/2004 LWONDIM1 00000055 150665 10085472

01 FC:2202 90.00 DA
02 FC:2201 129.00 DA

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DOCSOC1:146107.1